## FORM D

## **UNITED STATES** SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

# FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB A	PPROVAL
OMB Number	3235-0076
Expires:	April 30, 2008
	so burden
070	)47660
DATE	Distriction

<b>~</b>			
Name of Offering ( check if this is an amendment and name h	as changed, and indicate chang	c.)	
Offering of Limited Partnership Interests			
Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Ru	le 505 🗹 Rule 506	☐ Section 4(6)	□ ULOE
Type of Filing: ☑ New Filing ☐ Amendment			
A. BASIC	IDENTIFICATION DATA	· · · · · · · · · · · · · · · · · · ·	
1.Enter the information requested about the issuer			
Name of Issuer ( check if this is an amendment and name has ch	anged, and indicate change.)		
South Pacific Partners, Ltd.			
Address of Executive Offices (Number and Street, City, State, Zip Code)		Telephone Number	(Including Area Code)
510 Bering Drive, Suite 323, Houston, Texas 77057		713-974-8825	
Address of Principal Business Operations (Number and Street, City, Sta	te, Zip Code)	Telephone Number	r (Including Area Code)
(if different from Executive Offices)			
Same			
Brief Description of Business:			PROCESSED
Retail dining			
Type of Business Organization			111 D D D
☐ corporation ☑ limited partnership, already formed	other (please sp	ecify	MAR <b>2 3</b> 2007
☐ business trust ☐ limited partnership, to be formed			
Month	Year	_	THOMSON
Actual or Estimated Date of Incorporation or Organization: 09	2005 ☑ Actual	☐ Estimated	FINANCIAL
` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	Service abbreviation for State:	TV	
CN for Canada; FN for c	other foreign jurisdiction)	TX	

### GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Requested: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

SEC 1972 (6-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 8

	A, BASIC IL	DENTIFICATION DATA		
2. Enter the information requested for the following	:			
Each promoter of the issuer, if the issuer has	been organized within the	past five years;		
<ul> <li>Each beneficial owner having the power to v</li> </ul>	ote or dispose, or direct the	vote or disposition of, 10% or	more of a class of equity	y securities of the issuer;
Each executive officer and director of corporate to the corporate to	rate issuers and of corporate	general and managing partner	s of partnership issuers;	and
Each general and managing partner of partner	ership issuers.			
Check Box(es) that Apply:  Promoter	☐ Beneficial Owner	Executive Officer	Director	☑ General and/or
Check Box(es) that Apply:  Promoter	La Beneficial Owner	Executive Officer	Director	Managing Partner
E HN A A CASSACIA		- <del> </del>		
Full Name (Last name first, if individual)				
South Pacific Management, LLC Business or Residence Address (Num	ber and Street, City, Stat	te Zin Code)		
510 Bering Drive, Suite 323, Houston, Texas 77057	•	ic, zip code)		
Check Box(es) that Apply:  Promoter	Beneficial Owner	☑ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
Michael E. Flinn				
Business or Residence Address (Num	ber and Street, City, Stat	te, Zip Code)		····
510 Bering Drive, Suite 323, Houston, Texas 77057				
Check Box(es) that Apply:  Promoter	☑ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Australian Enterprises, L.P.				
Business or Residence Address (Num	ber and Street, City, Stat	te, Zip Code)		
510 Bering Drive, Suite 323, Houston, Texas 77057				
Check Box(es) that Apply: ☐ Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		-		
Business or Residence Address (Num	ber and Street, City, Stat	te, Zip Code)	1 1 1	
Check Box(es) that Apply:  Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Num	ber and Street, City, Sta	te, Zip Code)		
Check Box(es) that Apply:	☐ Beneficial Owner	Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)				
Business or Residence Address (Num	ber and Street, City, Star	te, Zip Code)		-
Check Box(es) that Apply:	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if individual)				
•				
Business or Residence Address (Num	ber and Street, City, Star	te, Zip Code)		
(Use blank	sheet, or copy and us	e additional copies of th	is sheet, as necessa	гу)

•	, ,-			B.	INFORMA	TION ABO	JT OFFER	ING				
ا. Has th	ne issuer sol	d, or does th	e issuer inte	nd to sell, to	non-accred	ited investor	s in this offe	ering?		••••	YES	NO M
•	A	nswer also in	Appendix,	Column 2, i	f filing unde	er ULOE.						
2. What	is the minin	num investm	ent that will	be accepted	from any in	idividual?		*****************			\$ 25,00	0
2 D	41 <b>6</b> 6			£: 1	.:49						YES <b>☑</b>	NO
		permit joint		_							_	ы
or s is ar brol	imilar remui n associated ker or dealer	nation request neration for superson or ago. If more that for that brok	solicitation o gent of a brol an five (5) po	of purchasers ker or dealer ersons to be	in connecti registered v	on with sale with the SEC	s of securiti and/or with	es in the offe a state or s	ering. If a p tates, list th	erson to be le name of the	listed e	
		e first, if ind pany (UK) I										
		e Address (1 , New York,			State, Zip (	Code)						
Peter J. M Scott, Na	Malone, Hug ancy E. Reif	Broker or Do th J. Marasa, Tullman, Bri . Cordi, Sr.,	Jr., Craig A an G. Ander	son, Stepher	ert N. Rotui n Soler, Jam	nno, Robert l les A. Reid, S	K. Connors, Steven R. H	Michael W ill, David J.	. Wagner, R Paladino, J	obert Bonav ason A. Russ	entura, Ada so, Peter H.	um M.
		on Listed Hates" or check						······································			☐ All Sta	tes
[AL] <b>✓</b> [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] <b>✓</b> [IA] [NV] [SD]	[AR] [KS] [NH] ✔ [TN]	[CA] ✔ [KY] [NJ] ✔ [TX] ✔	[CO] ✔ [LA] ✔ [NM] [UT]	[CT] <b>✓ ·</b> [ME] [NY] <b>✓</b> [VT]	[DE] ✔ [MD] [NC] ✔ [VA] ✔	[DC] [MA] <b>✓</b> [ND] [WA] <b>✓</b>	[FL] ✔ [MI] ✔ [OH] [WV]	[GA] <b>✓</b> [MN] [OK] [WI] <b>✓</b>	[HI] [MS] ✔ [OR] ✔ [WY]	[ID] [MO]✔ [PA] ✔ [PR]
Full Nan	ne (Last nam	e first, if ind	lividual)									
Business	or Residence	e Address (1	Number and	Street, City,	State, Zip (	Code)						
Name of	Associated	Broker or De	ealer									
		on Listed Ha							******		☐ All Sta	tes
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL] [MT] [RI]	[IN] [NE] [SC]	[IA] [NV] [SD]	[KS] [NH] [TN]	[KY] [NJ] [TX]	[LA] [NM] [UT]	[ME] [NY] [VT]	[MD] [NC] [VA]	[MA] [ND] [WA]	[MI] [OH] [WV]	[MN] [OK] [WI]	[MS] [OR] [WY]	[MO] [PA] [PR]
		ne first, if ind			[ · · ]		1 * * * J	[]	L'' 'J	[""]	[ ,, 1]	[1 10]
Business	or Residence	ce Address (1	Number and	Street, City,	State, Zip (	Code)		<u>.                                    </u>	<del></del>			
Name of	Associated	Broker or De	ealer				, N					
		on Listed Hates" or check									☐ All Sta	tes
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES	AND USE	OF PROCEEDS		
<ol> <li>Enter the aggregate offering price of securities included in this offering and the total amou already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering check this box</li></ol>	ıg,			
Type of Security		Aggregate	Α	mount Already
Units of Limited Partnership Interests, Promissory Notes and Warrants	(	Offering Price		Sold
Debt	. \$	0	<b>\$</b>	(
EquityLimited Partnership Interests (\$2,240,000)	\$	2,240,000	\$	794,97
Common Preferred	dt.	•	•	,
Convertible Securities (including warrants)	. 3	0	Ֆ	(
Partnership Interests	. \$_	0	\$	(
Other (Specify	_} \$_	0	\$	
Total	. \$	2,240,000	\$	794,97
Answer also in Appendix, Column 3, if filing under ULOE.				
<ol> <li>Enter the number of accredited and non-accredited investors who have purchased securities this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 50 indicate the number of persons who have purchased securities and the aggregate dollar amou of their purchases on the total lines. Enter "0" if answer is "none" or "zero."</li> </ol>	)4,			
		Number	j	Aggregate Dollar Amount of Purchases
Accredited Investors		Investors	¢	794,97
		10	Ψ	177,77,
Non-accredited Investors		0	\$	(
Total (for filings under Rule 504 only)	\$		\$	
Answer also in Appendix, Column 4, if filing under ULOE.				
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for al securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed Part C - Question 1.				
Type of offering		Type of Security	1	Dollar Amount Sold
Rule 505		N/A	\$	
Regulation A		N/A_	\$	
Rule 504		N/A_	\$	
Total		N/A	\$	
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	of			
Transfer Agent's Fees		☑	\$	0
Printing and Engraving Costs		☑	<b>\$</b>	300
Legal Fees		_ ☑	s	20,000
Accounting Fees		<b>⊡</b>	<u> </u>	0
Engineering Fees		<b>□</b>		0
Sales Commissions (specify finders' fees separately) *		☑	€	224,000
Other Expenses (identify) State filing fees and strategic advisors *		<b>☑</b>	φ	227,000
Total *Assumes sale of 100% of securities offered		_	⊅	244.200
1 oral * Assumes saic of 100% of securities offered		☑	\$	244,300

5.	Indicate below the amount of be used for each of the purpos furnish an estimate and check	the adjusted gross proceeds to the issuer used or proposed to ses shown. If the amount for any purpose is not known, the box to the left of the estimate. The total of the payments		\$1,995,700
	Question 4.b above.	gross proceeds to the issuer set forth in response to Part C -		
			Payments to Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees		☑ \$ None	☑ \$None_
	Purchase of real estate		☑ \$ <u>None</u>	☑ \$ None
	Purchase, rental or leasing an	d installation of machinery and equipment	☑ \$None	<b>☑</b> \$None_
	Construction or leasing of pla	ant buildings and facilities	☑ \$ None	<b>∑</b> \$None_
	this offering that may be used	(including the value of securities involved in lin exchange for the assets or securities of another	☑ \$ <u>None</u>	<b>☑</b> \$None_
	Repayment of indebtedness		☑ \$ None	☑ \$ None
	Working capital		☑ \$ None	<b>☑</b> \$ <u>1,495,700</u>
	Other (specify)	Redemption of Limited Partner	☑ \$ <u>None</u>	<b>☑</b> \$ <u>500,000</u>
	Column Totals		☑ \$ None	<b>☑</b> \$ <u>1,995,700</u>
	Total Payments Listed (colum	in totals added)	Ø \$ <u> </u>	,995,700
		D. FEDERAL SIGNATURE		
gnatu	re constitutes an undertaking	e to be signed by the undersigned duly authorized person. If the by the issuer to furnish to the U.S. Securities and Exchange Coronany non-accredited investor pursuant to paragraph (b)(2) of R	mmission, upon written	
suer	(Print or Type)	Signature	Date	
outh i	Pacific Partners, Ltd.	2m. g. 7 l.	March 13	3, 2007
ame (	of Signer (Print or Type)	Title of Signer (Print or Type)	1	
lichae	el E. Flinn	Manager of South Pacific Management, LLC, the sole		

	E. STATE SIGNATURE			
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No ☑	
	See Appendix, Column 5, for state response.			

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3 The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
South Pacific Partners, Ltd.	m. & 7 la.	March 13, 2007
Name of Signer (Print or Type)	Title of Signer (Print or Type)	<u> </u>
Michael E. Flinn	Manager of South Pacific Management, LLC, the sole general partner	

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				APPEN	NDIX				
• 1	Intend to to accre invest State (	2 d to sell non-edited stors in (Part B-m 1)	Type of security and aggregate offering price offered in state (Part C - and amount purchased in State		Type of investor			Disqualifi State UL attach exp waiver grai	5 cation under OE (if yes, planation of nted) (Part E- m 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL	<del> </del>	1							<b>*</b>
AK	<del> </del>	1				<u>.</u>			<b>✓</b>
AZ	1	1							<b>√</b>
AR		-							<b>*</b>
СЛ	<u> </u>	1	Limited Partnership Interests (\$7,000,000)	1	\$25,000	0	0		✓
СО		1							<b>*</b>
СТ		1							4
DE	1	1					" -		<b>*</b>
DC		1							4
FL		1							<b>*</b>
GA		1	Limited Partnership Interests (\$7,000,000)	2	\$85,000	0	0		<b>√</b>
HI		<b>*</b>							<b>*</b>
ID		1							✓
IL		1							✓
IN		<b>*</b>							<b>✓</b>
IA		✓						į	<b>~</b>
KS		1							✓
KY		~							✓
LA		✓							✓
ME		1							<b>4</b>
MD		1							1
MA		1							<b>*</b>
MI		<b>*</b>	Limited Partnership Interests (\$7,000,000)	2	\$200,000	0	0		<b>*</b>
MN		<b>✓</b>							<b>✓</b>
MS		1							<b>✓</b>

				APPEN	NDIX				
• 1	Intend to accr inves State	2 I to sell non- edited stors in (Part B- m 1)	Type of security and aggregate offering price offered in state (Part C - and amount purchased in State		Type of investor			State UL attach ex waiver gra	5 cation under .OE (if yes, planation of nted) (Part E- em 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
МО	1	1							✓
МТ		1	-						<b>✓</b>
NE		1							<b>✓</b>
NV		1							<b>V</b>
NH		1							✓
NJ		1							✓
NM	<u> </u>	1							<b>4</b>
NY		1							<b>*</b>
NC		1							<b>✓</b>
ND		1							<b>~</b>
ОН		1							<b>√</b>
ОК		1							✓
OR		1							4
PA		1							✓
RI		1							4
SC		1							<b>*</b>
SD		<b>*</b>			_				✓
TN		1							<b>~</b>
TX		1							✓
UT		1							✓
VT		<b>'</b>							✓
VA		1							✓
WA		<b>*</b>							✓
WV		<b>*</b>							✓
WI		1	Limited Partnership Interests (\$7,000,000)	1	\$25,000	0	0		<b>~</b>

	•			APPE	NDIX			<u> </u>	
• 1	Intend to sell to non- accredited investors in State (Part B- Item 1)  Intend to sell 3 Type of security and aggregate offering price offered in state (Part C- Item 1		4  Type of investor  and amount purchased in State  (Part C-Item 2)				State UI attach ex waiver gra	cation under .OE (if yes, planation of nted) (Part E- em 1)	
State	Yes	No 🗸		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
WY PR		<u> </u>							· ·
France		<b>✓</b>	Limited Partnership Interests (\$7,000,000)	2	\$99,975	0	0		✓
Germany		<b>4</b>	Limited Partnership Interests (\$7,000,000)	i	\$50,000	0	0		4
Italy		1	Limited Partnership Interests (\$7,000,000)	1	\$60,000	0	0		<b>*</b>
Netherlands		<b>✓</b>	Limited Partnership Interests (\$7,000,000)	4	\$150,000	0	0		<b>✓</b>
Switzerland		1	Limited Partnership Interests (\$7,000,000)	2	\$100,000	0	0		<b>√</b>

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